	Case 5:08-cv-00539-JF Document 2 F	Filed 01/24/2008	Page 1 of 4	
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	2	percasa Surva	ILED	
3		200 8 JA	124 P 2:33	
2	ADH	RICHA	.RD W. WIEKING N	/
5	5	บ.S. 0 พ.ก. กเ	CLERK ISTRICT COURT ST. OF CA. S	
6	5	18 1.2. 1.1	3 t. 0 f. 0 H, 3 H	
7	7			
8	" CHILD SIAIRS I	DISTRICT COUR	T	
9	NORTHERN DISTRIC	CI OF CALIFOR	NIA	
10	}			JF
11	Plaintiff, C	ANO. AA	520	
12) A	PPLICATION TO	PROCEED	RS
13		N FORMA PAUPE Non-prisoner cases only	<u>CRIS</u> ly)	
14	Defendant.			
15				
16		under penalty of pe		
17	in the above entitled case and that the information			
18	correct. I offer this application in support of my re			
19	prepay the full amount of fees, costs or give securi			
20	unable to pay the costs of this action or give securi			to reli
21	In support of this application, I provide the	following informat	tion:	
22	1. Are you presently employed?	Yes		
23	If your answer is "yes," state both your gross and no	et salary or wages p	er month, and give	the
24	name and address of your employer:			
25	Gross: 0 Net: 0	_		·
26	Employer: N/A			
27				
28	If the answer is "no," state the date of last employment	ent and the amount	of the gross and n	et salar
	- 1 -			

Cloud	dmark, I	per month which you received. nc., July, 2005, \$8,000 per month			
2.	Hav	e you received, within the past twelve (12)	months, any money from any of th		
follo	wing so	ources:			
	a.	Business, Profession or	Yes No 💻		
		self employment?			
	b.	Income from stocks, bonds,	Yes No No		
		or royalties?			
	c.	Rent payments?	Yes No No		
	d.	Pensions, annuities, or	Yes No No		
		life insurance payments?			
	e.	Federal or State welfare payments,	Yes 🚾 No 💷		
		Social Security or other govern-			
		ment source?			
If the	answe	er is "yes" to any of the above, describe each	h source of money and state the an		
received from each.					
@ \$160 per month (periodic self-employment); \$160 per month county assistance (food stamps)					
3.	Are	you married?	Yes No No		
Spou	se's Fu	II Name: N/A	****		
Spou	se's Pla	ace of Employment: N/A			
Spouse's Monthly Salary, Wages or Income:					
Gros	s \$ <u></u>	Net \$_0			
4.	a.	List amount you contribute to your spou	use's support:\$ 0		
	b.	List the persons other than your spouse	who are dependent upon you for a		

Case 5:08-cv-00539-J	Document 2 Filed (01/24/2008	Page 3 of 4				
children,	list only their initials and age	es. DO NOT I	INCLUDE THEIR NAMES.)				
3							
5. Do you own or a	re you buying a home?	Yes _	No M				
Estimated Market Value	e: \$ Amount	of Mortgage: S	\$				
6 6. Do you own an	automobile?	Yes_	No 📶				
Make N/A	Year	Model N/A					
21	Is it financed? Yes No If so, Total due: \$ 0						
	Monthly Payment: \$ 0						
I							
Name(s) and address(es			, ,				
ļ.) 01 bunk						
Present balance(s): \$							
14	Present balance(s): \$\frac{0}{2}\$ Do you own any cash? Yes No Amount: \$\frac{0}{2}\$						
li e			ach asset and its estimated				
	Do you have any other assets? (If "yes," provide a description of each asset and its estimated						
N/A	market value.) Yes No N/A						
		<u></u>					
8 8. What are your n		0					
	Utilities						
Food: \$	Clothin	g:					
Charge Accounts:							
Name of Account	Monthly Payment		Total Owed on This Account				
3 N/A	\$ ^{N/A}		N/A				
N/A	\$ ^{N/A}	\$	N/A				
5 N/A	\$ N/A	\$	N/A				
		bligations, inc	dicating amounts and to whom				

they are payable. Do not include account numbers.) No

	Case 5:08-cv-00539-JF Document 2 Filed 01/24/2008 Page 4 of 4
,	
2	10. Does the complaint which you are seeking to file raise claims that have been presented in
3	other lawsuits? Yes No No
4	Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in
5	which they were filed.
6	N/A
7	
8	I declare under the penalty of perjury that the foregoing is true and correct and understand that a
9	false statement herein may result in the dismissal of my claims.
10	10
11	1-24-00
12	DATE SIGNATURE OF APPLICANT
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